

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

American Hospital Association PAC

ADDRESS (number and street)

800 Tenth Street, NW

Two CityCenter, Suite 400

☐ Check if different than previously reported. (ACC)

Washington

DC

20001-4956

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00106146

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

01

2015

04

30

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Melinda Hatton

Signature of Treasurer

Ms. Melinda Hatton

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

06

19

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		1653206.80
(b) Cash on Hand at Beginning of Reporting Period.....	1746698.18	
(c) Total Receipts (from Line 19)	515679.13	895979.56
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2262377.31	2549186.36
7. Total Disbursements (from Line 31)	75529.59	362338.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2186847.72	2186847.72
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04		01		2015

To:

M M	/	D D	/	Y Y Y Y
04		30		2015

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

91852.48

225996.99

(ii) Unitemized

29908.49

58034.55

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

121760.97

284031.54

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

5000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

121760.97

289031.54

12. Transfers From Affiliated/Other

Party Committees.....

136750.00

349350.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

256999.36

256999.36

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

168.80

598.66

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

515679.13

895979.56

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

515679.13

895979.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	529.59	2638.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	529.59	2638.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	75000.00	359700.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	75529.59	362338.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	75529.59	362338.64

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	121760.97	289031.54
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	121760.97	289031.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	529.59	2638.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	256999.36	256999.36
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	-256469.77	-254360.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Donna Herrin Griffith CENP, FACH

Mailing Address 3 Devonshire St.

City State Zip Code
Huntsville AL 35806-5229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tyler & Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 01 / 2015

Transaction ID : 22370967

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ms. Etta S. Fielek

Mailing Address 110 4th St., SE

City State Zip Code
Washington DC 20003-1012

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Political Outreach

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 02 / 2015

Transaction ID : 22399722

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ms. Diane Weber

Mailing Address 155 North Wacker Drive

City State Zip Code
Chicago IL 60606-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Executive Director, SHSMD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 02 / 2015

Transaction ID : 22399724

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Susan Davila

Mailing Address 1213 W. Cottage Loop

City State Zip Code
 Gardnerville NV 89460-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carson Valley Medical Center

Occupation

Chief Executive Officer and Administra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 03 2015

Transaction ID : 22402884

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Christopher J Durovich

Mailing Address 1935 Medical District Drive

City State Zip Code
 Dallas TX 75235-7701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Medical Center of Dallas

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 06 2015

Transaction ID : 22403183

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Mr. Mike Rock

Mailing Address 800 10th Street, NW
 Two CityCenter, Suite 400

City State Zip Code
 Washington DC 20001-5188

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Sr. Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 08 2015

Transaction ID : 22404231

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Thomas W Huebner

Mailing Address 160 Allen Street

City

Rutland

State

VT

Zip Code

05701-4560

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rutland Regional Medical Center

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

04 / 09 / 2015

Transaction ID : 22404282

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

B. Mr. Jerry E Jurena

Mailing Address 1622 East Interstate Avenue, Suite

City

Bismarck

State

ND

Zip Code

58503-0512

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Dakota Hospital Association

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 06 / 2015

Transaction ID : 22404489

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Elizabeth Hale RN, MSN, C

Mailing Address PO Box 981

City

North Andover

State

MA

Zip Code

01845-0981

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lawrence General Hospital

Occupation

Vice President Patient Services and Ch

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 08 / 2015

Transaction ID : 22404492

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Steve Diaz MD

Mailing Address 149 North Street

City

Waterville

State

ME

Zip Code

04901-4974

FEC ID number of contributing
federal political committee.

C

Name of Employer

MaineGeneral Medical Center

Occupation

Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 08 / 2015

Transaction ID : 22404565

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Steven R Michaud

Mailing Address 33 Fuller Road

City

Augusta

State

ME

Zip Code

04330-4910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine Hospital Association

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 07 / 2015

Transaction ID : 22404566

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ms. Patty White RN, MS

Mailing Address 475 South Dobson Road

City

Chandler

State

AZ

Zip Code

85224-5605

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph's Hospital and Medical Cent

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 07 / 2015

Transaction ID : 22404567

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Keith E Heuser

Mailing Address 570 Chautauqua Boulevard

City State Zip Code
Valley City ND 58072-3145

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

04 / 06 / 2015

Transaction ID : 22404631

Amount of Each Receipt this Period

330.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael J McBride FACHE

Mailing Address P O Box 1628

City State Zip Code
Grand Junction CO 81502-1628

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Mary's Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 06 / 2015

Transaction ID : 22404706

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael T Rowan FACHE

Mailing Address 198 Inverness Drive West, Suite 80

City State Zip Code
Englewood CO 80112-5202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catholic Health Initiatives

Occupation

Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 06 / 2015

Transaction ID : 22404707

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1080.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. David L Albrecht

Mailing Address 2250 NW 26th Street

City

Owatonna

State

MN

Zip Code

55060-5503

FEC ID number of contributing
federal political committee.

C

Name of Employer

Owatonna Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 07 / 2015

Transaction ID : 22404711

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Bradley Beard

Mailing Address 6401 France Avenue South

City

Edina

State

MN

Zip Code

55435-2104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fairview Southdale Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 07 / 2015

Transaction ID : 22404713

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Ronald Cork

Mailing Address 619 E Mayo St

City

O'Neill

State

NE

Zip Code

68763-0270

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera St. Anthony's Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 07 / 2015

Transaction ID : 22404722

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Dan Griess FACHE

Mailing Address 744 W. 16th St

City

Alliance

State

NE

Zip Code

69301-0810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Box Butte General Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 07 / 2015

Transaction ID : 22404725

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Mark Brett

Mailing Address 339 Kensington Road

City

East Lansing

State

MI

Zip Code

48823-4046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sparrow Hospital

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 08 / 2015

Transaction ID : 22404730

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Ms. Amelia Jones

Mailing Address 22401 Foster Winter Drive

City

Southfield

State

MI

Zip Code

48075-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oakland Regional Hospital

Occupation

Chief Operating Officer and Acting Chi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 08 / 2015

Transaction ID : 22404734

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

775.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Mary Lou Wesley

Mailing Address 5301 East Huron River Drive

City State Zip Code
Ypsilanti MI 48197-1051

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Mercy Ann Arbor

Occupation

Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

MM / DD / YYYY
04 / 08 / 2015

Transaction ID : 22404737

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

B. Mr. Matthew L Anderson JD

Mailing Address 2550 University Avenue W.

City State Zip Code
Saint Paul MN 55114-1052

FEC ID number of contributing
federal political committee.

C

Name of Employer

Minnesota Hospital Association

Occupation

Vice President, Regulatory/Strategic A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.90

Date of Receipt

MM / DD / YYYY
04 / 03 / 2015

Transaction ID : 22404748

Amount of Each Receipt this Period

276.90

Full Name (Last, First, Middle Initial)

C. Mr. Lawrence J Massa

Mailing Address 2550 University Avenue West, Suite

City State Zip Code
Saint Paul MN 55114-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer

Minnesota Hospital Association

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

MM / DD / YYYY
04 / 03 / 2015

Transaction ID : 22404758

Amount of Each Receipt this Period

660.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1199.40

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Ben Peltier

Mailing Address 2550 University Avenue W.
Suite 350-S

City State Zip Code
Saint Paul MN 55114-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer

Minnesota Hospital Association

Occupation

Vice President, Legal Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.82

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2015

Transaction ID : 22404760

Amount of Each Receipt this Period

330.82

Full Name (Last, First, Middle Initial)

B. Mr. Robby Robertson

Mailing Address 11 Coventry Lane

City State Zip Code
Andover MA 01810-2235

FEC ID number of contributing
federal political committee.

C

Name of Employer

Winchester Hospital

Occupation

V.P. Facilities & Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2015

Transaction ID : 22406423

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

c. Dr. Charles E Cavagnaro III MD

Mailing Address 40 Wright Street

City State Zip Code
Palmer MA 01069-1138

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baystate Wing Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2015

Transaction ID : 22406427

Amount of Each Receipt this Period

562.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1268.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Maura McQueeney BSN, MPH,

Mailing Address 67 Hemlock Dr

City

Killingworth

State

CT

Zip Code

06419-2225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baystate Health, Inc.

Occupation

President, Baystate Visiting Nurse Ass

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

04 / 03 / 2015

Transaction ID : 22406430

Amount of Each Receipt this Period

562.50

Full Name (Last, First, Middle Initial)

B. Mr Rakesh Talati

Mailing Address 135 Cooley Drive

City

Longmeadow

State

MA

Zip Code

01106-1305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baystate Franklin Medical Center

Occupation

Associate CMO/Chair of Emergency Medic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

04 / 03 / 2015

Transaction ID : 22406431

Amount of Each Receipt this Period

562.50

Full Name (Last, First, Middle Initial)

C. Mr. Joel Rudin

Mailing Address 3 Webster Street

City

Winchester

State

MA

Zip Code

01890-2117

FEC ID number of contributing
federal political committee.

C

Name of Employer

New England Rehabilitation Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

04 / 03 / 2015

Transaction ID : 22406433

Amount of Each Receipt this Period

562.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1687.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Christine C Schuster RN, MBA

Mailing Address 133 Old Road to Nine Acre Corner

City

Concord

State

MA

Zip Code

01742-9120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emerson Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

562.50

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406535

Amount of Each Receipt this Period

562.50

Full Name (Last, First, Middle Initial)

B. Mr. John Szum

Mailing Address 3 Windsor Road

City

East Walpole

State

MA

Zip Code

02032-1359

FEC ID number of contributing
federal political committee.

C

Name of Employer

Care Group, Inc.

Occupation

Executive Vice President & CFO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

562.50

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406545

Amount of Each Receipt this Period

562.50

Full Name (Last, First, Middle Initial)

C. Ms. Theresa M. Ahern

Mailing Address 22 Kate's Glen

City

Plymouth

State

MA

Zip Code

02360-8264

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cape Cod Healthcare, Inc.

Occupation

Sr. VP, Strategy and Community, Gov't

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406546

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Donald Guadagnoli MD

Mailing Address 15 Abegale Snow Road

City

West Barnstable

State

MA

Zip Code

02668-1378

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cape Cod Healthcare, Inc.

Occupation

Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406600

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

B. Mr Alexander Heard

Mailing Address 58 Punchbowl Drive

City

Falmouth

State

MA

Zip Code

02540-2341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Falmouth Hospital

Occupation

Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406601

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Mr. Patrick Kane

Mailing Address 57 Angela Way

City

West Barnstable

State

MA

Zip Code

02668-1200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cape Cod Healthcare, Inc.

Occupation

Sr. Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406604

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1012.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Michael K Lauf MBA

Mailing Address 88 Lewis Bay Road

City

Hyannis

State

MA

Zip Code

02601-5210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cape Cod Healthcare, Inc.

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406621

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Ms Linda Moulton

Mailing Address 9 Doty Avenue

City

Danvers

State

MA

Zip Code

01923-3907

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lahey Hospital & Medical Center, Burli

Occupation

CEO - International Health

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406623

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

C. Mr Victor Oliveira

Mailing Address 37 Glenrose Road

City

Dorchester

State

MA

Zip Code

02124-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cape Cod Healthcare, Inc.

Occupation

V.P., Patient Financial Services

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406624

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

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1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr Kevin Ralph

Mailing Address 578 Huckins Neck Road

City

Centerville

State

MA

Zip Code

02632-1411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cape Cod Healthcare, Inc.

Occupation

Chief Development Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406631

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

B. Mr. Eric Stastny

Mailing Address 67 Scott Rd

City

Belmont

State

MA

Zip Code

02478-3343

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emerson Hospital

Occupation

Vice President, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406636

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Ms Linda Weller-Ferris

Mailing Address 8E Seven Springs Lane

City

Burlington

State

MA

Zip Code

01803-5123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lahey Health

Occupation

V.P., Lahey Health Cancer Institute

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406638

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Joseph White

Mailing Address 10 Lakeside Terrace

City

Westford

State

MA

Zip Code

01886-1392

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lowell General Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406639

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Mr. Jason Radzevich

Mailing Address 275 Sandwich Street

City

Plymouth

State

MA

Zip Code

02360-2183

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beth Israel Deaconess Hospital Plymouth

Occupation

Vice President Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406643

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Ms. Nancy L. Shendell-Falik

Mailing Address 17 Falcon Heights Rd

City

Wilbraham

State

MA

Zip Code

01095

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baystate Medical Center

Occupation

Sr. Vice President/ CNO/COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 10 / 2015

Transaction ID : 22406644

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1387.50

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Peter L Slavin MD

Mailing Address 55 Fruit Street

City

Boston

State

MA

Zip Code

02114-2622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Massachusetts General Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	5

Transaction ID : 22406645

Amount of Each Receipt this Period

1125.00

Full Name (Last, First, Middle Initial)

B. Ms. Deborah K Weymouth MBA, FACHE

Mailing Address 100 Keyes Road, Apt. 214

City

Concord

State

MA

Zip Code

01742-1653

FEC ID number of contributing
federal political committee.

C

Name of Employer

HealthAlliance Hospitals

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	5

Transaction ID : 22406646

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

C. Mr Karl Kussin

Mailing Address 51 Riverside Avenue

City

Concord

State

MA

Zip Code

01742-3026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emerson Hospital

Occupation

V.P., Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	5

Transaction ID : 22406651

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

1875.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jerry G Moeller FACHE

Mailing Address P O Box 2408

City

Stillwater

State

OK

Zip Code

74076-2408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stillwater Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 02 / 2015

Transaction ID : 22406695

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Leslie D Hirsch FACHE

Mailing Address 28 MacKenzie Lane North

City

Denville

State

NJ

Zip Code

07834-2954

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint Clare's Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

04 / 02 / 2015

Transaction ID : 22406788

Amount of Each Receipt this Period

130.00

Full Name (Last, First, Middle Initial)

c. Mr. Stephen M. Ahnen

Mailing Address 125 Airport Road

City

Concord

State

NH

Zip Code

03301-7300

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

04 / 13 / 2015

Transaction ID : 22407033

Amount of Each Receipt this Period

45.50

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TOTAL This Period (last page this line number only)..... ►

675.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Mary Schulte

Mailing Address One North Franklin

City State Zip Code
 Chicago IL 60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American Hospital Association-Chicago

Occupation
 Account Manager, Health Forum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 13 / 2015

Transaction ID : 22407039

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Kathy D Moore

Mailing Address 5997 N. Cape Arago Place

City State Zip Code
 Garden City ID 83714-4022

FEC ID number of contributing
federal political committee.

C

Name of Employer
 St. Luke's Regional Medical Center

Occupation
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : 22407042

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Ryan C Larsen FACHE

Mailing Address 2602 Schoenheit

City State Zip Code
 Falls City NE 68355-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Community Medical Center

Occupation
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 14 / 2015

Transaction ID : 22407220

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Scott G Barrilleaux FACHE, MHA

Mailing Address 778 Scogin Drive

City

Monticello

State

AR

Zip Code

71655-5729

FEC ID number of contributing
federal political committee.

C

Name of Employer

Drew Memorial Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409331

Amount of Each Receipt this Period

325.00

Full Name (Last, First, Middle Initial)

B. Ms. Tina Creel

Mailing Address 419 Natural Resources Drive

City

Little Rock

State

AR

Zip Code

72205-1576

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arkansas Hospital Association

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409332

Amount of Each Receipt this Period

325.00

Full Name (Last, First, Middle Initial)

C. Mr. Paul Cunningham

Mailing Address 419 Natural Resources Drive

City

Little Rock

State

AR

Zip Code

72205-1576

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arkansas Hospital Association

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409333

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

975.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Lyndsey Dumas

Mailing Address 419 Natural Resources Drive

City State Zip Code
 Little Rock AR 72205-1576

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arkansas Hospital Association

Occupation

Vice President of Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22409334

Amount of Each Receipt this Period

325.00

Full Name (Last, First, Middle Initial)

B. Mr. Vincent Leist

Mailing Address 620 North Main Street

City State Zip Code
 Harrison AR 72601-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Arkansas Regional Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22409335

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

C. Ms Debbie Love

Mailing Address 419 Natural Resources Drive

City State Zip Code
 Little Rock AR 72205-1576

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arkansas Hospital Association

Occupation

Director of Financial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22409336

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

877.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Mark Lowman

Mailing Address 9601 Interstate 630, Exit 7

City State Zip Code
 Little Rock AR 72205-7299

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baptist Health

Occupation

Vice President Strategic Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409337

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

B. Mr. Jason Miller MPH

Mailing Address 21 Bridgeway Road

City State Zip Code
 North Little Rock AR 72113-9514

FEC ID number of contributing
federal political committee.

C

Name of Employer

BridgeWay, The

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409338

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

C. Mr. Ron Peterson FACHE

Mailing Address 624 Hospital Drive

City State Zip Code
 Mountain Home AR 72653-2955

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baxter Regional Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.50

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409342

Amount of Each Receipt this Period

342.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

797.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Robert Rupp

Mailing Address 1205 McLain Street

City

Newport

State

AR

Zip Code

72112-3533

FEC ID number of contributing
federal political committee.

C

Name of Employer

Harris Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

227.50

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409343

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

B. Mr. Robert Ryall

Mailing Address 419 Natural Resources Drive

City

Little Rock

State

AR

Zip Code

72205-1576

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arkansas Hospital Association

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

650.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409344

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

C. Ms. Rosi Smith

Mailing Address 1 Children's Way

City

Little Rock

State

AR

Zip Code

72202-3500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arkansas Children's Hospital

Occupation

Government Relations Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

227.50

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409345

Amount of Each Receipt this Period

227.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1105.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Jodiane Tritt

Mailing Address 419 Natural Resources Drive

City State Zip Code
 Little Rock AR 72205-1576

FEC ID number of contributing
federal political committee.

C

Name of Employer

Arkansas Hospital Association

Occupation

Vice President Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22409346

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

B. Mr. Troy R Wells

Mailing Address 9601 Interstate 630, Exit 7

City State Zip Code
 Little Rock AR 72205-7202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baptist Health

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22409347

Amount of Each Receipt this Period

325.00

Full Name (Last, First, Middle Initial)

C. Ms. Barbara Williams PhD

Mailing Address 13612 Rivercrest Drive

City State Zip Code
 Little Rock AR 72212-1460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Conway Regional Medical Center

Occupation

Board Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22409348

Amount of Each Receipt this Period

227.50

SUBTOTAL of Receipts This Page (optional)..... ►

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1202.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Michael Scott Peek

Mailing Address P O Box 639

City

Danville

State

AR

Zip Code

72833-0639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chambers Memorial Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409378

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

B. Mr. Joseph Landsman

Mailing Address 1520 Cherokee Trail Suite 200

City

Knoxville

State

TN

Zip Code

37920-2239

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Tennessee Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409747

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

C. Mr. Jason Little

Mailing Address 350 North Humphreys Boulevard

City

Memphis

State

TN

Zip Code

38120-2177

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baptist Memorial Health Care Corporati

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409748

Amount of Each Receipt this Period

800.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1827.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. David R Posch

Mailing Address 1301 Medical Center Drive
Ste. 3812 TVC

City Nashville State TN Zip Code 37232-0028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vanderbilt Hospital and Clinics

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

MM / DD / YYYY
04 / 16 / 2015

Transaction ID : 22409750

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

B. Ms. Christine Bradley

Mailing Address 2007 Terrace Place

City Nashville State TN Zip Code 37203-2412

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vanderbilt Hospital and Clinics

Occupation
Asst. Vice Chancellor, Government Rela

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
04 / 16 / 2015

Transaction ID : 22409751

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Mr. David Entwistle

Mailing Address 50 North Medical Drive

City Salt Lake City State UT Zip Code 84132-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Utah Health Care - Hospi

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
04 / 17 / 2015

Transaction ID : 22409766

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2200.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Paul Korth

Mailing Address P O Box 340

City State Zip Code
 Cookeville TN 38503-0340

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cookeville Regional Medical Center

Occupation
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22409767

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. Mr. Scott Bowman

Mailing Address 304 Wright Street

City State Zip Code
 Sweetwater TN 37874-2897

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Sweetwater Hospital

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22409768

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Mr. Thomas H Gee

Mailing Address P O Box 1030

City State Zip Code
 Paris TN 38242-1030

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Henry County Medical Center

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22409769

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Bobby Arnold

Mailing Address 620 Skyline Drive

City

Jackson

State

TN

Zip Code

38301-3923

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Tennessee Healthcare

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409770

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

B. Mr. Craig A Becker

Mailing Address 5201 Virginia Way

City

Brentwood

State

TN

Zip Code

37027-7540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Tennessee Hospital Association

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409771

Amount of Each Receipt this Period

1600.00

Full Name (Last, First, Middle Initial)

C. Matthew Bailey FACHE

Mailing Address 4681 E. County Road 100 S.

City

Avon

State

IN

Zip Code

46123-8336

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University Health West Hospita

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409818

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Raymond Grady

Mailing Address 2239 Charter Pointe Drive

City

Arlington Heights

State

IL

Zip Code

60004-7226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Methodist Hospitals

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409820

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. John M Horner

Mailing Address 2347 Saddle Drive

City

Shelbyville

State

IN

Zip Code

46176-1236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Major Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409821

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Robert D McLin

Mailing Address 5506 N. Water Tower Road

City

Bruceville

State

IN

Zip Code

47516-6035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Good Samaritan Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22409822

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Paul L Usher

Mailing Address 637 Laura Lane
PO Box 97

City State Zip Code
Sweetser IN 46987-0097

FEC ID number of contributing
federal political committee.

C

Name of Employer

Marion General Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2015

Transaction ID : 22409824

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. David H. Wiesman

Mailing Address 4521 Hickory Grove Blvd.

City State Zip Code
Greenwood IN 46143-7448

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana Hospital Association

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2015

Transaction ID : 22409825

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Mr. Joseph W Devine FACHE

Mailing Address 136 Mimosa Drive

City State Zip Code
Sewell NJ 08080-2805

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kennedy Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22409857

Amount of Each Receipt this Period

1300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2300.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Aline M. Holmes RN, APN, M

Mailing Address 19 Ashford Drive

City

Plainsboro

State

NJ

Zip Code

08536-3632

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Senior VP, Clinical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22409864

Amount of Each Receipt this Period

1300.00

Full Name (Last, First, Middle Initial)

B. Dr. Cheryl L Hoying PhD, RN, N

Mailing Address 3333 Burnet Avenue

City

Cincinnati

State

OH

Zip Code

45229-3026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cincinnati Children's Hospital Medical

Occupation

Senior Vice President, Patient Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22409970

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Ryan Biles

Mailing Address 1503 Runaway Bay Drive
Suite 1B

City

Columbus

State

OH

Zip Code

43204-4814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Hospital Association

Occupation

Director, Health Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22409977

Amount of Each Receipt this Period

625.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2425.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Clifford R. Lehman

Mailing Address 448 Strathaven

City

Findlay

State

OH

Zip Code

45840-7468

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Hospital Association

Occupation

Senior Vice President Services & Opera

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22409979

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

B. Mr. Sean McGlone

Mailing Address 155 East Broad Street

City

Columbus

State

OH

Zip Code

43215-3609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Hospital Association

Occupation

Senior Vice President, General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22409980

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

C. Dr. William H Kose MD

Mailing Address 4578 TR 25

City

Rawson

State

OH

Zip Code

45881-9720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blanchard Valley Hospital

Occupation

Senior Vice President Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22409985

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1525.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Olas A Hubbs III FACHE

Mailing Address 17800 Willow Wood Dr

City

Marysville

State

OH

Zip Code

43040-5512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22409986

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael Abrams

Mailing Address 155 East Broad Street

City

Columbus

State

OH

Zip Code

43215-3609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Hospital Association

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22409987

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Mr. Bruce James

Mailing Address 659 Boulevard

City

Dover

State

OH

Zip Code

44622-2026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Union Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22409990

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3250.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms Maggie Coleman

Mailing Address 1730 Iroquois Trail

City

Hastings

State

MI

Zip Code

49058-9758

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pennoch Health Services

Occupation

Trustee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 17 / 2015

Transaction ID : 22410018

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

B. Mr. J. Paul Conway

Mailing Address 44010 Deep Hollow Circle

City

Northville

State

MI

Zip Code

48168-8412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oakwood Healthcare, Inc.

Occupation

Sr. Vice President - Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22410019

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Dr. Michael Geheb MD

Mailing Address 645 Lone Pine Rd

City

Bloomfield Hills

State

MI

Zip Code

48304-3331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oakwood Hospital-Dearborn

Occupation

Division President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 17 / 2015

Transaction ID : 22410021

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

875.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Edith M Hughes

Mailing Address 24498 E River Road

City

Grosse Ile

State

MI

Zip Code

48138-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oakwood Hospital-Southshore

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22410023

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

B. Ms. Barbara Medvec

Mailing Address 5686 Briar Glen

City

Saline

State

MI

Zip Code

48176-9537

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oakwood Healthcare, Inc.

Occupation

Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22410026

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

c. Mr. Randall D Oostra FACHE

Mailing Address 1801 Richards Road

City

Toledo

State

OH

Zip Code

43607-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer

ProMedica Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22410028

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

875.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Francine M Padgett

Mailing Address 4005 Orchard Drive

City

Midland

State

MI

Zip Code

48670-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

MidMichigan Health

Occupation

Senior Vice President and Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 17 / 2015

Transaction ID : 22410029

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

B. Dr. Diane Postler-Slaterry PhD

Mailing Address 410 Sherwood Lane

City

Midland

State

MI

Zip Code

48642

FEC ID number of contributing
federal political committee.

C

Name of Employer

MidMichigan Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22410032

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. David N Keith FACHE

Mailing Address P O Box 1228

City

McAlester

State

OK

Zip Code

74502-1228

FEC ID number of contributing
federal political committee.

C

Name of Employer

McAlester Regional Health Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22410078

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

862.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Douglas K Weaver FACHE

Mailing Address P O Box 278

City

State

Zip Code

Pryor

OK

74362-0278

FEC ID number of contributing
federal political committee.

C

Name of Employer

Integris Mayes County Medical Center

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2015

Transaction ID : 22410087

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Jill Berry Bowen

Mailing Address 133 Fairfield Street

City

State

Zip Code

Saint Albans

VT

05478-1726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwestern Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22410120

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

c. Dr. Kathleen D Sanford DBA, MA, R

Mailing Address 2659 Syracuse Ct

City

State

Zip Code

Denver

CO

80238-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catholic Health Initiatives

Occupation

Senior Vice President, Chief Nursing O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22415063

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1850.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Pamela Rudisill DNP, RN, N

Mailing Address 17225 Royal Court Drive

City

Davidson

State

NC

Zip Code

28036-7843

FEC ID number of contributing
federal political committee.

C

Name of Employer

Community Health Systems, Inc.

Occupation

Senior Vice President/CNO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22415068

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ms Darla K Watanabe

Mailing Address 401 Baltic Circle
Unit 401

City

Redwood City

State

CA

Zip Code

94065-2259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stanford Health Care

Occupation

Patient Care Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 16 / 2015

Transaction ID : 22415075

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Helene M Burns MSN, RN, N

Mailing Address 2 Westberry Drive

City

Berlin

State

NJ

Zip Code

08009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kennedy Health System

Occupation

Chief Nursing Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22415190

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

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1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Maureen Swick RN, PhD, N

Mailing Address 32 Blair Ct

City

Ocean

State

NJ

Zip Code

07712-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Inova Health System

Occupation

Senior Vice President, Chief Nurse Exe

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22415191

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Linda J Knodel MHA, MSN,

Mailing Address 3606 N Thistle Wood Ct

City

Springfield

State

MO

Zip Code

65803-6401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Hospital Springfield

Occupation

Senior Vice President and Chief Nursin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22415211

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

c. Ms. Carol Bradley MSN, RN, C

Mailing Address 1919 NW Lovejoy Street

City

Portland

State

OR

Zip Code

97209-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer

Legacy Health

Occupation

Senior Vice President and Chief Nursin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 16 / 2015

Transaction ID : 22415212

Amount of Each Receipt this Period

500.00

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1850.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Laura J Caramanica PhD, RN, C

Mailing Address 280 Meeting Street

City State Zip Code
 Marietta GA 30060-2591

FEC ID number of contributing
federal political committee.

C

Name of Employer

WellStar Kennestone Hospital

Occupation

Vice President and Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22415224

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Theresa Pando RN, MA

Mailing Address 109 Meadbrook Road

City State Zip Code
 Garden City NY 11530-2601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Long Island Jewish Medical Center

Occupation

Deputy Chief Nursing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22415278

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Claire Murray MS, RN

Mailing Address 402 Lois Ln

City State Zip Code
 Schenectady NY 12304-2543

FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Organization of Nurse Executi

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2015

Transaction ID : 22415279

Amount of Each Receipt this Period

350.00

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1200.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jeffery L Hudson RN, MSN, C

Mailing Address 31734 Mill Dr

City
Springville

State
CA

Zip Code
93265-9427

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sierra View District Hospital

Occupation

Vice President, Patient Care Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2015

Transaction ID : 22415327

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Stephen F Wright

Mailing Address 3330 Masonic Drive

City
Alexandria

State
LA

Zip Code
71301-3841

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHRISTUS Highland Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419102

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Bill Davis

Mailing Address 1001 Gause Boulevard

City
Slidell

State
LA

Zip Code
70458-2939

FEC ID number of contributing
federal political committee.

C

Name of Employer

Slidell Memorial Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419103

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Isaac Palmer

Mailing Address One St Mary Place

City

Shreveport

State

LA

Zip Code

71101-4343

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHRISTUS Highland Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419104

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Clifford M Broussard FACHE

Mailing Address 2400 Hospital Drive

City

Bossier City

State

LA

Zip Code

71111-2385

FEC ID number of contributing
federal political committee.

C

Name of Employer

WK Bossier Health Center

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419105

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. K Scott Wester FACHE

Mailing Address 5000 Hennessy Boulevard

City

Baton Rouge

State

LA

Zip Code

70808-4375

FEC ID number of contributing
federal political committee.

C

Name of Employer

Our Lady of the Lake Regional Medical

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419106

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Teri G Fontenot FACHE

Mailing Address P O Box 95009

City

Baton Rouge

State

LA

Zip Code

70895-9009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Woman's Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419108

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Larry M Graham FACHE

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419109

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Mr. Robert L. Burgess

Mailing Address 1125 West Highway 30

City

Gonzales

State

LA

Zip Code

70737-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Elizabeth Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419110

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

2250.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Patrick J Quinlan MD, MHA

Mailing Address 1514 Jefferson Highway

City

New Orleans

State

LA

Zip Code

70121-2484

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ochsner Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419111

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Ms. Cindy Nuesslein

Mailing Address 2021 Perdido Street

City

New Orleans

State

LA

Zip Code

70112-1352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interim LSU Public Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419112

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Mr. Sean M. Prados FACHE

Mailing Address 9521 Brookline Avenue

City

Baton Rouge

State

LA

Zip Code

70809-8409

FEC ID number of contributing
federal political committee.

C

Name of Employer

Louisiana Hospital Association

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419113

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Paul A. Salles

Mailing Address 2450 Severn Avenue, Suite 210

City State Zip Code
 Metairie LA 70001-6942

FEC ID number of contributing
federal political committee.

C

Name of Employer

Louisiana Hospital Association

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : 22419114

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Timothy J. Allen FACHE

Mailing Address 4608 Highway 1

City State Zip Code
 Raceland LA 70394-2623

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ochsner St. Anne General Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : 22419115

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Ms. Sue Knight CPA

Mailing Address 1125 W Highway 30

City State Zip Code
 Gonzales LA 70737-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Elizabeth Hospital

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : 22419116

Amount of Each Receipt this Period

275.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1525.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Todd Eppler FACHE

Mailing Address P O Box 920

City
Springhill

State
LA

Zip Code
71075-0920

FEC ID number of contributing
federal political committee.

C

Name of Employer

De Soto Regional Health System

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419117

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms Lisa Miranda

Mailing Address 2021 Perdido Street

City

New Orleans

State

LA

Zip Code

70112-1352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Interim LSU Public Hospital

Occupation

SVP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419118

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. William F Barrow II

Mailing Address 611 Saint Landry St

City

Lafayette

State

LA

Zip Code

70506-4627

FEC ID number of contributing
federal political committee.

C

Name of Employer

Our Lady of Lourdes Regional Medical C

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419119

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Nancy R Hellyer RN, FACHE

Mailing Address 3330 Masonic Drive

City

Alexandria

State

LA

Zip Code

71301-3841

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHRISTUS St. Frances Cabrini Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419120

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Donna Shields

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

VP Patient Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419121

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Ms. Bernita Loyd- Brown , LD, LDN

Mailing Address 1701 Oak Park Blvd

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Vice President, Support Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419122

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Timothy O Coffey

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Senior Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419123

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Todd Delahoussaye MBA

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Sr. VP, Specialty & Physician Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419124

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Ms. Marilyn McSwain RNC, MSN

Mailing Address 1900 West Gauthier Road

City

Lake Charles

State

LA

Zip Code

70605-7170

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital for Wom

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

04 / 24 / 2015

Transaction ID : 22419125

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

775.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Kevin Mocklin MD

Mailing Address 1701 Oak Park Boulevard

City State Zip Code
 Lake Charles LA 70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Director Medical Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : 22419126

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. Mr. Rick D. Wallace FACHE

Mailing Address 801 West Maple Street

City State Zip Code
 Farmington NM 87401-5630

FEC ID number of contributing
federal political committee.

C

Name of Employer

San Juan Regional Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 23 / 2015

Transaction ID : 22419267

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Ms. Elaine Couture BSN, MBA,

Mailing Address P O Box 2555

City State Zip Code
 Spokane WA 99220-2555

FEC ID number of contributing
federal political committee.

C

Name of Employer

Providence Sacred Heart Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 23 / 2015

Transaction ID : 22419273

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

675.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Steven Mulder MD

Mailing Address 1095 Highway 15 South

City State Zip Code
Hutchinson MN 55350-3182

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hutchinson Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2015

Transaction ID : 22419304

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Kevin E Coughlin

Mailing Address 1 Hospital Drive

City State Zip Code
Lowell MA 01852-1311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saints Medical Center

Occupation

Vice President Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419328

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Mr. Steven MacLauchlan MHSA

Mailing Address 61 Columbus Road

City State Zip Code
Boylston MA 01505-1429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint Vincent Hospital

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419329

Amount of Each Receipt this Period

562.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1075.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Edward Kelly

Mailing Address 14 Prospect Street

City State Zip Code
 Milford MA 01757-3090

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Milford Regional Medical Center

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : 22419330

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

B. Mr Charles Pu

Mailing Address 1575 Cambridge Street

City State Zip Code
 Cambridge MA 02138-4308

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Spaulding Hospital for Continuing Medi

Occupation
 Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : 22419331

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Mr. Edward Feldmann

Mailing Address 67 E. Greenwich Road

City State Zip Code
 Longmeadow MA 01106-1257

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Baystate Health, Inc.

Occupation
 Chief, Neurology Division

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 24 / 2015

Transaction ID : 22419342

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1012.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Kathy Schuler RN, MS

Mailing Address 1 Alpine Circle

City State Zip Code
Wakefield MA 01880-1544

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Winchester Hospital Vice President of Patient Care Service

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
262.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419344

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

B. Ms. Mary T Sweeney

Mailing Address 41 Highland Avenue

City State Zip Code
Winchester MA 01890-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Winchester Hospital Vice President, Strategic Development

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419345

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

C. Ms. Michele A Talka

Mailing Address 280 Chestnut St. Att:Compensation

City State Zip Code
Springfield MA 01144

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Baystate Health, Inc. VP, Human Resources Operation & Total

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
262.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2015

Transaction ID : 22419346

Amount of Each Receipt this Period

262.50

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TOTAL This Period (last page this line number only)..... ►

900.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Michael R Perry MD

Mailing Address 1045 West Stephenson Street

City

State

Zip Code

Freeport

IL

61032-4864

FEC ID number of contributing
federal political committee.

C

Name of Employer

FHN Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 27 / 2015

Transaction ID : 22419368

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

B. Mr. James R Prister

Mailing Address 5601 South County Line Road

City

State

Zip Code

Hinsdale

IL

60521-4875

FEC ID number of contributing
federal political committee.

C

Name of Employer

RML Specialty Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 27 / 2015

Transaction ID : 22419369

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Mr. Jose R Sanchez LCSW

Mailing Address 1044 North Francisco Avenue

City

State

Zip Code

Chicago

IL

60622-2743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norwegian American Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 27 / 2015

Transaction ID : 22419370

Amount of Each Receipt this Period

800.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. James C Leonard MD

Mailing Address 611 West Park Street

City

Urbana

State

IL

Zip Code

61801-2500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carle Foundation Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

04 / 27 / 2015

Transaction ID : 22419371

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

B. Mr. Jim H Skogsbergh

Mailing Address 2025 Windsor Drive

City

Oak Brook

State

IL

Zip Code

60523-1586

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advocate Health Care

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

04 / 27 / 2015

Transaction ID : 22419372

Amount of Each Receipt this Period

1200.00

Full Name (Last, First, Middle Initial)

C. Mr. Bradford W Dykes

Mailing Address 2533 E. Sailor Lane

City

Bloomington

State

IN

Zip Code

47401-8194

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana University Health Bedford Hosp

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 28 / 2015

Transaction ID : 22419385

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2650.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Douglas J Leonard FACHE

Mailing Address 4319 Benthaven Dr. East

City State Zip Code
Bargersville IN 46106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana Hospital Association

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2015

Transaction ID : 22419386

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Ms Elizabeth Aderholt

Mailing Address 8077 Hawkcrest Drive

City State Zip Code
Grand Blanc MI 48439-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Genesys Health System

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2015

Transaction ID : 22419387

Amount of Each Receipt this Period

1050.00

Full Name (Last, First, Middle Initial)

C. Mr. Thomas Bres

Mailing Address P O Box 30480

City State Zip Code
Lansing MI 48909-7980

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sparrow Hospital

Occupation

Vice President and Chief Administrativ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2015

Transaction ID : 22419393

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2312.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Garry Macak

Mailing Address P.O. Box 329

City

Dimondale

State

MI

Zip Code

48821-0329

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michigan Health & Hospital Association

Occupation

Controller, For-Profit Activities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

04 / 28 / 2015

Transaction ID : 22419403

Amount of Each Receipt this Period

245.00

Full Name (Last, First, Middle Initial)

B. Mr. David Marcellino

Mailing Address 41511 Thoreau Ridge

City

Novi

State

MI

Zip Code

48377-2853

FEC ID number of contributing
federal political committee.

C

Name of Employer

Botsford Hospital

Occupation

Corporate Executive Vice President and

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 28 / 2015

Transaction ID : 22419404

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Ms. Paula Reichle

Mailing Address 919 Hagadorn Road

City

Mason

State

MI

Zip Code

48854-9336

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sparrow Health System

Occupation

Senior Vice President and Chief Financ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 28 / 2015

Transaction ID : 22419407

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

770.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Anne E. Cramer

Mailing Address 153 Packard Road

City

Jericho

State

VT

Zip Code

05465-2025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vermont Association of Hospitals & Hea

Occupation

Legal Counsel VTHA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422051

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Stephen M. Ahnen

Mailing Address 125 Airport Road

City

Concord

State

NH

Zip Code

03301-7300

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.50

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422053

Amount of Each Receipt this Period

45.50

Full Name (Last, First, Middle Initial)

C. Ms. Sandra L Coletta

Mailing Address 455 Tollgate Road

City

Warwick

State

RI

Zip Code

02886-2759

FEC ID number of contributing
federal political committee.

C

Name of Employer

Care New England Health System

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422060

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

745.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. James B Falahee Jr

Mailing Address 7463 Cottage Oak Drive

City

State

Zip Code

Portage

MI

49024-2352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group, Inc.

Occupation

Senior Vice President Legal and Legis

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422245

Amount of Each Receipt this Period

525.00

Full Name (Last, First, Middle Initial)

B. Ms Jean Meyer

Mailing Address 18273 Woodbury Court

City

State

Zip Code

Northville

MI

48168-8844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Providence Park Hospital

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422252

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. Frank J Sardone

Mailing Address 601 John Street

City

State

Zip Code

Kalamazoo

MI

49007-5341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group, Inc.

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422254

Amount of Each Receipt this Period

525.00

SUBTOTAL of Receipts This Page (optional)..... ►

1400.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Paul M Shirilla

Mailing Address 2124 Twin Eagles Drive

City

Traverse City

State

MI

Zip Code

49686-9306

FEC ID number of contributing
federal political committee.

C

Name of Employer

Munson Healthcare

Occupation

Vice President and General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422255

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

B. Mr. Kenneth L Taft

Mailing Address 301 John Street

City

Kalamazoo

State

MI

Zip Code

49007-5295

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Methodist Hospital

Occupation

Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422257

Amount of Each Receipt this Period

280.00

Full Name (Last, First, Middle Initial)

C. Mr. Timothy H Moore

Mailing Address 830 South Gloster Street

City

Tupelo

State

MS

Zip Code

38801-4934

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mississippi Hospital Association

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 30 / 2015

Transaction ID : 22422281

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1292.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Randall G Nyp FACHE

Mailing Address 655 North 1495 Road

City

Lawrence

State

KS

Zip Code

66049-9189

FEC ID number of contributing
federal political committee.

C

Name of Employer

Providence Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

04 / 30 / 2015

Transaction ID : 22422296

Amount of Each Receipt this Period

275.00

Full Name (Last, First, Middle Initial)

B. Mr. Randall Peterson

Mailing Address 1500 SW Tenth Avenue

City

Topeka

State

KS

Zip Code

66604-1301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stormont-Vail HealthCare

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 30 / 2015

Transaction ID : 22422299

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Joseph L Woodin

Mailing Address P O Box 2000

City

Randolph

State

VT

Zip Code

05060-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gifford Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 30 / 2015

Transaction ID : 22422494

Amount of Each Receipt this Period

350.00

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TOTAL This Period (last page this line number only)..... ►

1125.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Maureen Banks RN, FACHE,

Mailing Address Dove Avenue

City
Salem

State
MA

Zip Code
01970-2999

FEC ID number of contributing
federal political committee.

C

Name of Employer

Spaulding Rehabilitation Hospital

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22454121

Amount of Each Receipt this Period

562.50

Full Name (Last, First, Middle Initial)

B. Ms. Judith Melin

Mailing Address 41 Mall Road

City
Burlington

State
MA

Zip Code
01805-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lahey Hospital & Medical Center, Burli

Occupation

Chief Medical Services Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22454122

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Mr John Connolly

Mailing Address 174 Point Rd

City
Marion

State
MA

Zip Code
02738-1931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beth Israel Deaconess Hospital-Needham

Occupation

Trustee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2015

Transaction ID : 22454124

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Trish Hannon FACHE

Mailing Address 125 Parker Hill Avenue

City

Roxbury Crossing

State

MA

Zip Code

02120-2847

FEC ID number of contributing
federal political committee.

C

Name of Employer

New England Baptist Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22454125

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Mr. Edward H Moore

Mailing Address 100 South Street

City

Southbridge

State

MA

Zip Code

01550-4051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Harrington Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22454129

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Dr. Scott L Rauch MD

Mailing Address 115 Mill Street

City

Belmont

State

MA

Zip Code

02478-1064

FEC ID number of contributing
federal political committee.

C

Name of Employer

McLean Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22454133

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

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1875.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. John O Wilhelm Jr

Mailing Address 133 Old Road to Nine Acre Corner

City State Zip Code
 Concord MA 01742-9120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emerson Hospital

Occupation

Senior Vice President and Chief Financ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

04 / 17 / 2015

Transaction ID : 22454135

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

B. Ms Betty LaRue MN, RN

Mailing Address 40 Uplands Drive

City State Zip Code
 West Hartford CT 06107-1039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baystate Medical Center

Occupation

Vice President Heart and Vascular Neur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

04 / 17 / 2015

Transaction ID : 22454137

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Mr. Francis M Saba

Mailing Address 14 Prospect Street

City State Zip Code
 Milford MA 01757-3090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Milford Regional Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

04 / 17 / 2015

Transaction ID : 22454140

Amount of Each Receipt this Period

562.50

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Leslie D Hirsch FACHE

Mailing Address 28 MacKenzie Lane North

City

Denville

State

NJ

Zip Code

07834-2954

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint Clare's Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

04 / 30 / 2015

Transaction ID : 22454164

Amount of Each Receipt this Period

130.00

Full Name (Last, First, Middle Initial)

B. Ms. Merry Beth Kraus

Mailing Address 1445 N. Clinton Place

City

River Forest

State

IL

Zip Code

60305-1205

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director, Constituency Section

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 30 / 2015

Transaction ID : 3278574

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Melinda Reid Hatton

Mailing Address 800 10th Street, NW
Two CityCenter, Suite 400

City

Washington

State

DC

Zip Code

20001-5188

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President & General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

04 / 30 / 2015

Transaction ID : PR1045726234581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

706.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. David Schulke

Mailing Address 155 N. Wacker Dr.

City

Chicago

State

IL

Zip Code

60606-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

VP Research Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

04 / 30 / 2015

Transaction ID : PR1057462134581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Dale A Kirby

Mailing Address P O Box 331

City

Colusa

State

CA

Zip Code

95932-0331

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

04 / 30 / 2015

Transaction ID : PR1125892334581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Erik Rasmussen

Mailing Address 800 10th Street, NW

Two CityCenter, Suite 400

City

Washington

State

DC

Zip Code

20001-5188

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

04 / 30 / 2015

Transaction ID : PR1819487934581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 70 OF 93

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Linda Fishman

Mailing Address 800 10th Street, NW

Two CityCenter, Suite 400

City

Washington

State

DC

Zip Code

20001-5188

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR327629134581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Michael P. McCue

Mailing Address 122 N. Greenwood Avenue

City

Park Ridge

State

IL

Zip Code

60068-3227

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR327771634581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Debra J. Stock

Mailing Address 1022 S. Harvey Avenue

City

Oak Park

State

IL

Zip Code

60304-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Member Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR327777834581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 93
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Pamela Austin Thompson MS, RN, FA

Mailing Address 800 10th Street, NW

Two CityCenter, Suite 400

City

Washington

State

DC

Zip Code

20001-5188

FEC ID number of contributing
federal political committee.

C

Name of Employer

AONE

Occupation

AHA Senior Vice President, CEO America

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR327812034581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Mark Seklecki

Mailing Address 800 10th Street, NW

Two CityCenter, Suite 400

City

Washington

State

DC

Zip Code

20001-5188

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Political Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR327858034581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. John F. Barry

Mailing Address One North Franklin

City

Millis

State

MA

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR327877834581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. George F. Bergstrom

Mailing Address 130 North Garland Court
 #3002

City State Zip Code
 Chicago IL 60602-4750

FEC ID number of contributing
 federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 04 30 2015

Transaction ID : PR327895734581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Thomas J. Bonner FACHE

Mailing Address P.O. Box 679010

City State Zip Code
 Austin TX 78767-9010

FEC ID number of contributing
 federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 04 30 2015

Transaction ID : PR327983734581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Richard J. Umbdenstock

Mailing Address 800 10th Street, NW
 Two CityCenter, Suite 400

City State Zip Code
 Washington DC 20001-5188

FEC ID number of contributing
 federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 04 30 2015

Transaction ID : PR328132834581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

230.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Barbara Lorsbach

Mailing Address 204 7th Ave

City

La Grange

State

IL

Zip Code

60525-6406

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Sr. Vice President, Member Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR328136934581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Donna J. Melkonian

Mailing Address 5545 North Wayne

City

Chicago

State

IL

Zip Code

60640-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR328223834581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Ron O. Purcell

Mailing Address 1093 N. Faldo Way

City

Eagle

State

ID

Zip Code

83616-5369

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR328241434581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Richard J. Pollack

Mailing Address 3475 North Venice Street

City

Arlington

State

VA

Zip Code

22207-4446

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

MM / DD / YYYY
04 / 30 / 2015

Transaction ID : PR328260934581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Carolyn Forcina

Mailing Address 200 Clover Hill Court

City

Yardley

State

PA

Zip Code

19067-5736

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

MM / DD / YYYY
04 / 30 / 2015

Transaction ID : PR328511834581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Alicia N. Mitchell

Mailing Address 1501 N. Harrison Street

City

Arlington

State

VA

Zip Code

22205-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President, Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

MM / DD / YYYY
04 / 30 / 2015

Transaction ID : PR328512034581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 93

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Anthony S Burke

Mailing Address 155 N Wacker Dr

City

Chicago

State

IL

Zip Code

60606-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

AHA Solutions, Inc.

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	1	5		

Transaction ID : PR328913334581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Dr. John R. Combes

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

President & Chief Operating Officer, C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	1	5		

Transaction ID : PR329071334581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Robyn L. BashMailing Address 800 10th Street, NW
Two CityCenter, Suite 400

City

Washington

State

DC

Zip Code

20001-5188

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Executive Director, Federal Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	1	5		

Transaction ID : PR329084434581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

230.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 93

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. W. Thomas Deweese

Mailing Address 500 Interstate Boulevard South

City

Nashville

State

TN

Zip Code

37210-4634

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

AHA Regional Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				3	0				2	0	1	5

Transaction ID : PR329215734581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Thomas Misfeldt

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Regional Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				3	0				2	0	1	5

Transaction ID : PR330411634581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Paul N. Muraca

Mailing Address 4960 138th Circle West

City

Apple Valley

State

MN

Zip Code

55124-9229

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				3	0				2	0	1	5

Transaction ID : PR330475434581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

230.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 93

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Eileen O'Keefe

Mailing Address 172 Atteridge

City

Lake Forest

State

IL

Zip Code

60045-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Constituency Section

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR330549234581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Darlene S. Vanderbush

Mailing Address 26 West Glendale Ave.

City

Alexandria

State

VA

Zip Code

22301-2402

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Operations - APP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR331304234581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Megan CundariMailing Address 800 10th Street, NW
Two CityCenter, Suite 400

City

Washington

State

DC

Zip Code

20001-5188

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR518031934581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

230.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Ashley B. Thompson

Mailing Address 606 S. Royal St.

City

Alexandria

State

VA

Zip Code

22314-4142

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : PR766023734581

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

76.94

91852.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. California Healthcare Association PAC - Federal

Mailing Address 1215 K Street
Suite 800

City State Zip Code
Sacramento CA 95814

FEC ID number of contributing
federal political committee.

C C00237495

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

135000.00

Date of Receipt

04 / 14 / 2015

Transaction ID : 22406693

Amount of Each Receipt this Period

135000.00

Full Name (Last, First, Middle Initial)

B. Wisconsin Hospital Association Federal PAC

Mailing Address 5510 Research Park Drive
PO Box 259038

City State Zip Code
Madison WI 53725-9038

FEC ID number of contributing
federal political committee.

C C00422881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3350.00

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422049

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Wisconsin Hospital Association Federal PAC

Mailing Address 5510 Research Park Drive
PO Box 259038

City State Zip Code
Madison WI 53725-9038

FEC ID number of contributing
federal political committee.

C C00422881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4350.00

Date of Receipt

04 / 29 / 2015

Transaction ID : 22422050

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

136750.00

136750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mentzer Media Services, Inc.

Mailing Address 600 Fairmount Avenue
Suite 306

City State Zip Code
Towson MD 21286

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256999.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 14 / 2015

Transaction ID : 22451585

Amount of Each Receipt this Period

256999.36

Refund

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

256999.36

256999.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. TD Bank

Mailing Address 901 Seventh Street, NW

City
Washington

State Zip Code
DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : 22451583

Amount of Each Receipt this Period

168.80

Interest Earned

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

168.80

168.80

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 82 OF 93

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Newtek Merchant Solutions

Mailing Address 744 N 4th Street

City Milwaukee State WI Zip Code 53203

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 02 2015**Transaction ID : 22451578**

Amount of Each Disbursement this Period

214.71

Merchant Fees

Full Name (Last, First, Middle Initial)

B. PaymentechMailing Address 14221 Dallas Parkway
Building Two

City Dallas State TX Zip Code 75254

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 03 2015**Transaction ID : 22451579**

Amount of Each Disbursement this Period

32.95

Merchant Fees

Full Name (Last, First, Middle Initial)

C. PaymentechMailing Address 14221 Dallas Parkway
Building Two

City Dallas State TX Zip Code 75254

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 06 2015**Transaction ID : 22451581**

Amount of Each Disbursement this Period

39.86

Merchant Fees

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

287.52

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 93

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. TD Bank

Mailing Address 901 Seventh Street, NW

City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2015

Transaction ID : 22451582

Amount of Each Disbursement this Period

199.81

Bank Fee

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

199.81

487.33

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Kirk For Senate

Mailing Address PO Box 2594

City	State	Zip Code
Chicago	IL	60690

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Mark Steven KirkCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : 22409287

Amount of Each Disbursement this Period

3000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Davis For Congress/Friends Of Davis

Mailing Address 5956 W. Race Avenue

City	State	Zip Code
Chicago	IL	60644

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Danny K. DavisCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : 22409288

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Elect Blake Farenthold Committee

Mailing Address PO Box 3369

City	State	Zip Code
Corpus Christi	TX	78463

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Blake FarentholdCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : 22409289

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Joe Kennedy For Congress

Mailing Address PO Box 590464

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Joseph A. Kennedy IIIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : 22409290

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Jason Smith For Congress

Mailing Address PO Box 1324

City Cape Girardeau	State MO	Zip Code 63702
------------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Jason T. SmithOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : 22409291

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Joe Wilson For Congress Committee

Mailing Address PO Box 2145

City West Columbia	State SC	Zip Code 29171
-----------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Joe WilsonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : 22409292

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Searchlight Leadership FundMailing Address 700 Thirteenth Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2015 Contribution

Candidate Name

Searchlight Leadership Fund

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : 22409296

Amount of Each Disbursement this Period

5000.00

2015 Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Todd Young, Inc.

Mailing Address PO Box 1053

City Bloomington State IN Zip Code 47402

Purpose of Disbursement
Contribution

Candidate Name

Rep. Todd Young

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : 22409297

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Country Roads PAC

Mailing Address PO Box 5202

City Charleston State WV Zip Code 25361

Purpose of Disbursement
2015 Contribution

Candidate Name

Country Roads PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2015

Transaction ID : 22409299

Amount of Each Disbursement this Period

5000.00

2015 Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Butterfield For CongressMailing Address 434 Fayetteville Street
Suite 2020

City Raleigh State NC Zip Code 27601

Purpose of Disbursement
Contribution

Candidate Name

Rep. G. K. ButterfieldOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422477

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mooney For Congress

Mailing Address P.O. Box 1863

City Martinsburg State WV Zip Code 25402

Purpose of Disbursement
Contribution

Candidate Name

Rep. Alex MooneyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: WV District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422479

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mcnerney For Congress

Mailing Address P.O. Box 690371

City Stockton State CA Zip Code 95269

Purpose of Disbursement
Contribution

Candidate Name

Rep. Jerry McNerneyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422480

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 93

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Promoting our Republican Team PAC

Mailing Address 8331 Little Harbor Drive

City	State	Zip Code
Cincinnati	OH	45244

Purpose of Disbursement
2015 Contribution

011

Candidate Name

Promoting our Republican Team PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422481

Amount of Each Disbursement this Period

5000.00

2015 Contribution

Full Name (Last, First, Middle Initial)

B. True North PAC

Mailing Address 3705 Arctic Blvd #447

City	State	Zip Code
Anchorage	AK	99503-5774

Purpose of Disbursement
2015 Contribution

011

Candidate Name

True North PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422482

Amount of Each Disbursement this Period

5000.00

2015 Contribution

Full Name (Last, First, Middle Initial)

C. Vern Buchanan For Congress

Mailing Address P. O. Box 48928

City	State	Zip Code
Sarasota	FL	34230

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Vern Buchanan

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422484

Amount of Each Disbursement this Period

4000.00

Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Castor For Congress

Mailing Address 301 W Platt Street, #385

City
TampaState
FLZip Code
33606Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Kathy CastorCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422485

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Jeff Miller For Congress

Mailing Address P. O. Box 126

City
PensacolaState
FLZip Code
32591Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Jeff B. MillerCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422486

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Patrick Murphy

Mailing Address 4521 Pga Blvd #412

City
Palm Beach GardensState
FLZip Code
33418Purpose of Disbursement
Contribution

011

Candidate Name

Patrick MurphyCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2015

Transaction ID : 22422487

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Lobiondo For Congress

Mailing Address P. O. Box 550

City
VinelandState
NJZip Code
08362Purpose of Disbursement
Contribution

Candidate Name

Rep. Frank A. LoBiondoOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422489

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Rob Wittman For Congress

Mailing Address PO Box 999

City
MontrossState
VAZip Code
22520Purpose of Disbursement
Contribution

Candidate Name

Rep. Robert J. WittmanOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422490

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ryan For Congress, Inc.

Mailing Address PO Box 1488

City
JanesvilleState
WIZip Code
53547Purpose of Disbursement
Contribution

Candidate Name

Rep. Paul D. RyanOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422491

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ryan For Congress, Inc.

Mailing Address PO Box 1488

City	State	Zip Code
Janesville	WI	53547

Purpose of Disbursement
Contribution

Candidate Name

Rep. Paul D. Ryan

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: WI District: 01

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : 22422492

Amount of Each Disbursement this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2500.00

75000.00
